

CSM Contest Model Entry Form

Contest Category: _____

Special Award Category: _____

Subject: _____

Kit(s) Used: _____ Scale _____

Comments / Special Notes:

Please complete the information below and FOLD this portion under

NAME _____

Contestant No. _____

*If you registered online, this is your ticket / receipt no.
OR use the number assigned at Check-IN*

Cell Phone Number, in case moving of models is needed by CSM Staff so
Contestant can be contacted. Will not be shared by CSM Staff

Cell Phone: -----